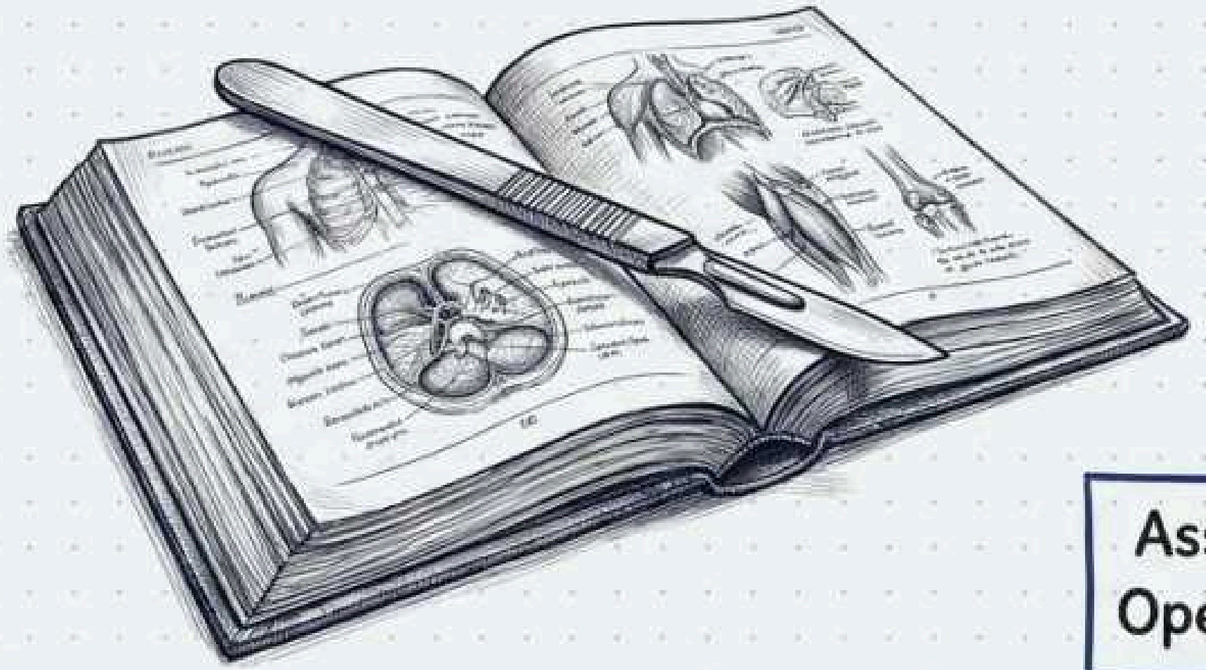
MED 542 B: SURGERY

Lecture 0 — Course Overview



Assessing, Preparing,
Operating, Recovering.

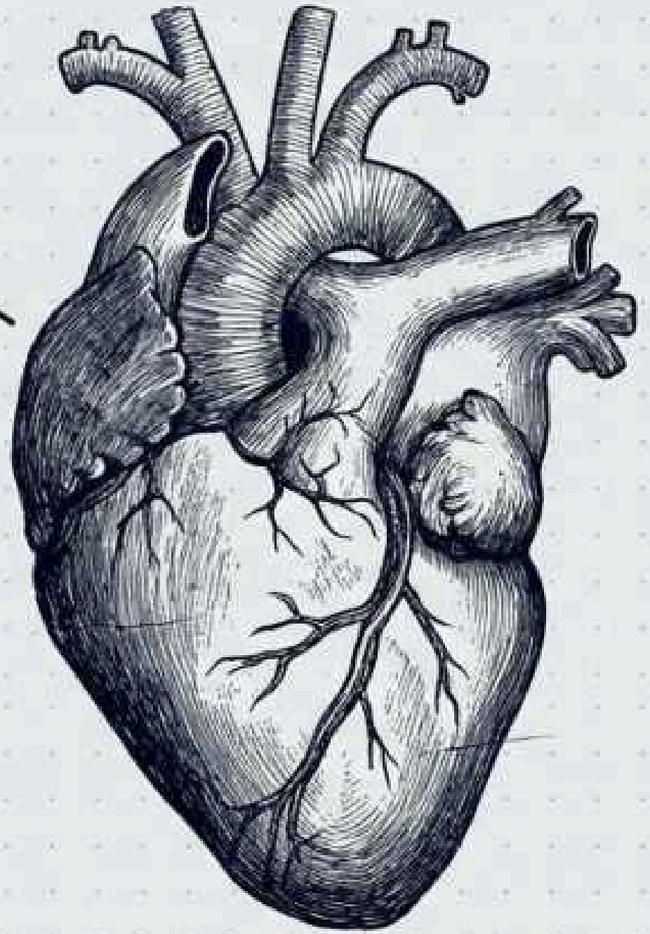
Welcome to Anderson Academy

¶ 0.1

The Pedigree

→ Modelled on the Harvard & MIT Health Sciences & Technology core surgery clerkship.

The second clinical clerkship course in the Academy's Medical School.



The Curriculum Map

{ Assess → Prepare → Operate → Recover }

Includes: Common conditions, Trauma, Oncology.

Course Communication Protocol

¶ 0.2



Email: ◻ garyanderson@mail.grokbot.com

X/Twitter: @garyanderson

Questions and feedback regarding the course are actively welcomed.

¶ 0.3

Provides	Does NOT Provide
Medical Knowledge.	Medical Training, Clinical Skills, Licensure, Medical Advice. (Completing this does not make you a medical doctor or surgeon).

URGENT CLINICAL WARNING:

$\sum$ (Severe abdominal pain + rigid abdomen + fever + vomiting)

$\Rightarrow$ Seek immediate emergency medical attention.



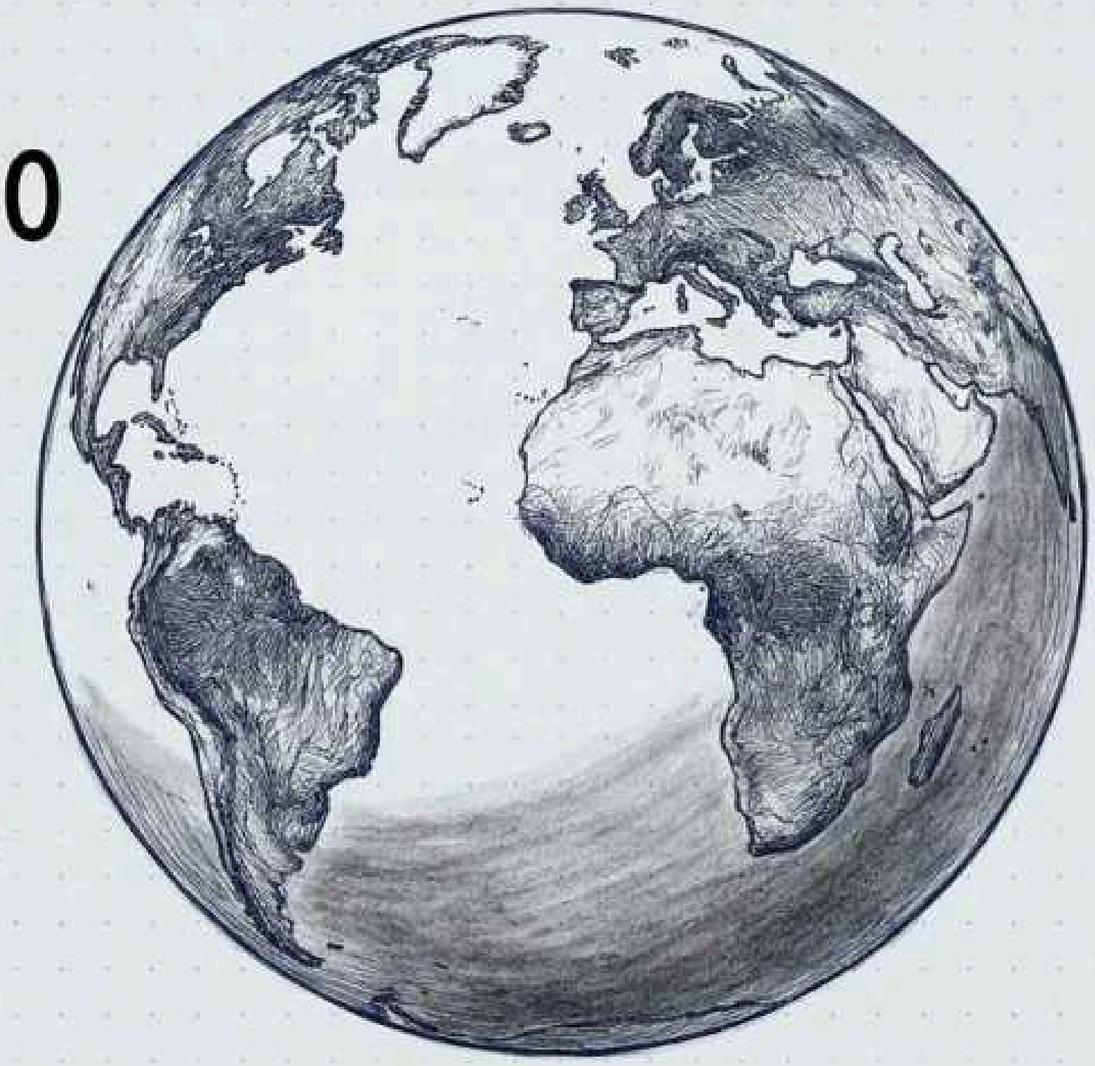
The Global Surgical Deficit

¶ 0.4

$$N_{unmet_need} \approx 5{,}000{,}000{,}000$$

~5 Billion humans lack access to safe, affordable surgery and anaesthesia when needed.

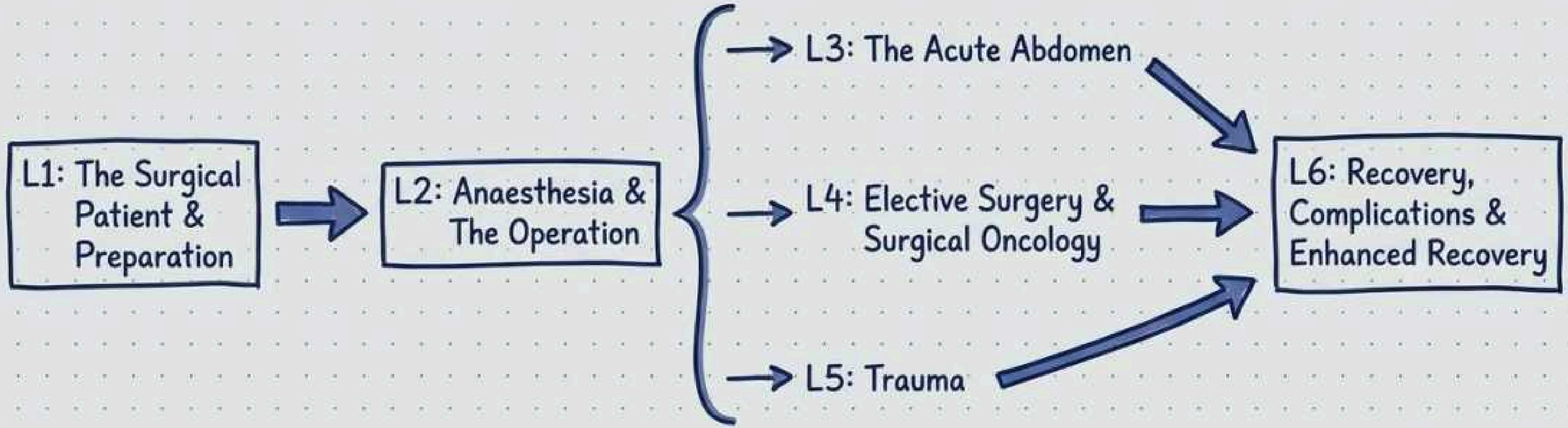
Surgery treats a massively disproportionate share of the world's global disease burden.



Source: Lancet Commission on Global Surgery, 2015.

Clinical Syllabus Map

¶ 0.5



Required Conceptual Foundation

¶ 0.6

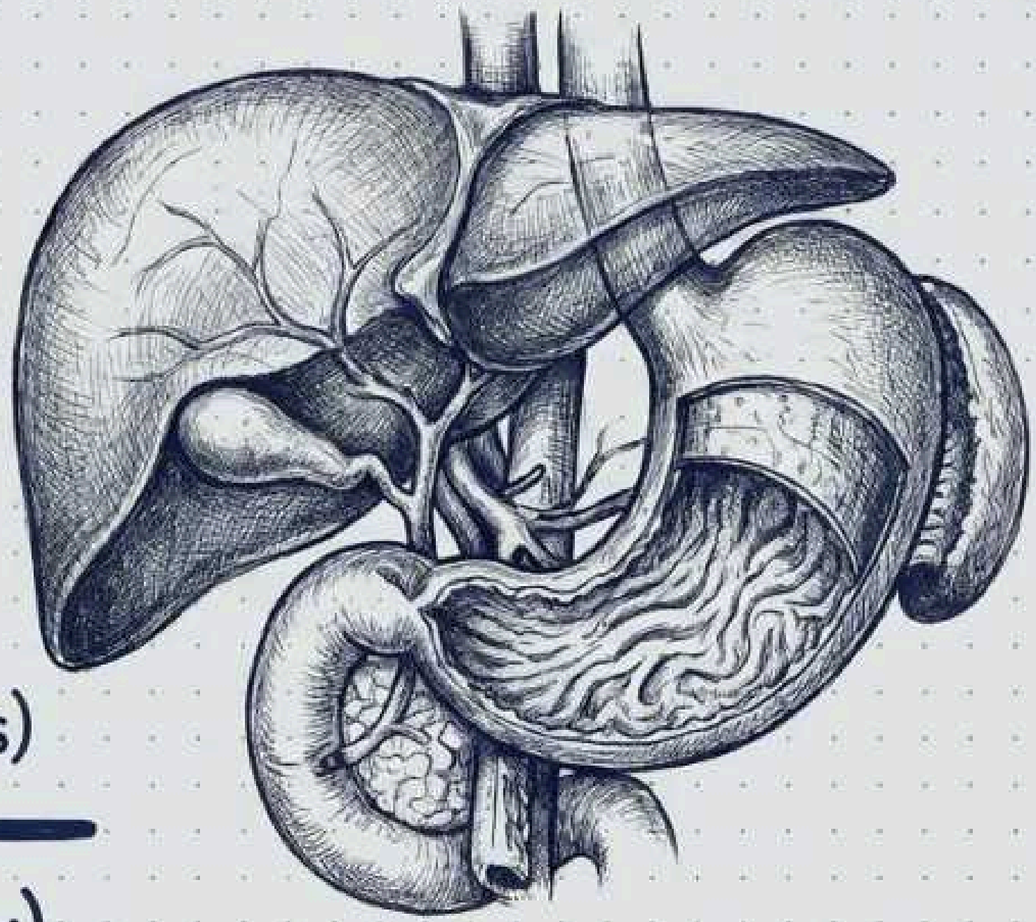
Recommended background in 2nd-year organ-system courses.

MED 524 B
(Gastroenterology & Hepatology)

\+ MED 535 B
(Introduction to Clinical Medicine)

\+ MED 541 B
(Internal Medicine / Medical Comorbidities)

= Foundation for MED 542 B (Surgery)

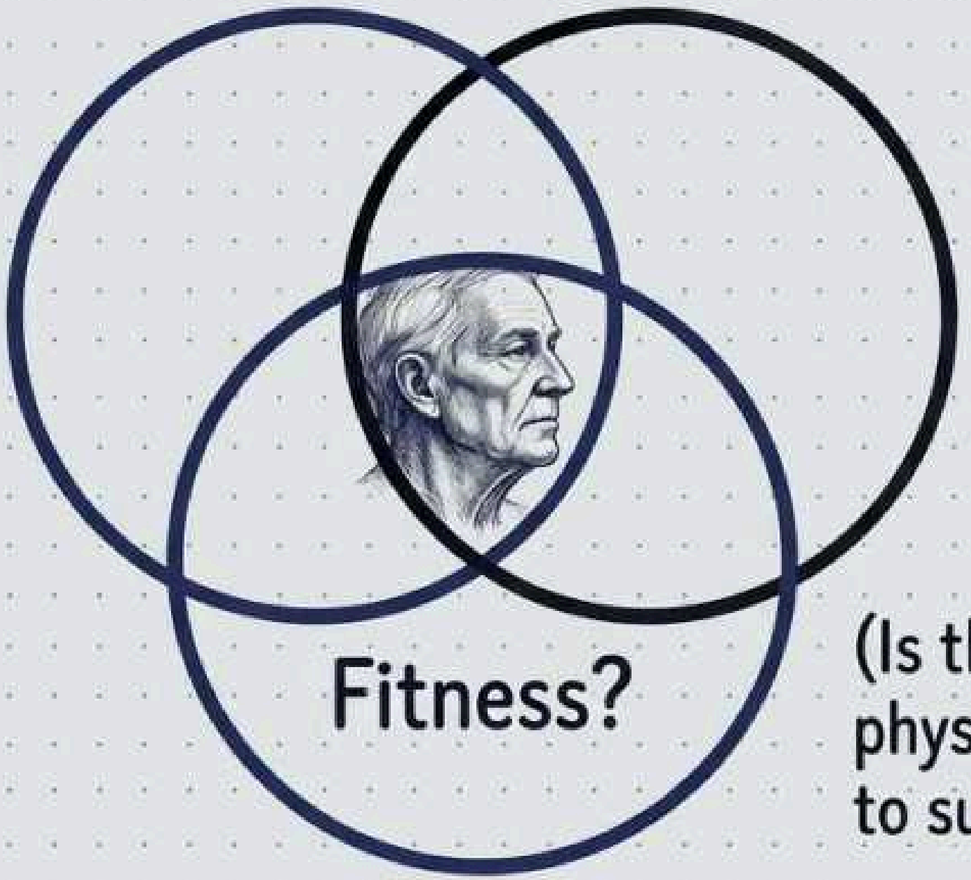


The Surgical Decision Algorithm

¶ 0.7

$$\text{Operate} = f(\text{Need}) \times f(\text{Urgency}) \times f(\text{Fitness})$$

Need?
(Does this patient actually require an operation?)



Urgency?
(How fast must we act to prevent morbidity/mortality?)

(Is the patient physically fit enough to survive and benefit?)

☆ The answers depend as much on the patient as on the disease.

¶ 0.8

So let us begin with the surgical patient.



→ Proceed to Lecture 1.